

GIFTOR AUTHORIZATION

- The Account Owner should use this form to authorize one or more Giftor(s) to obtain information about their gift to this account and to receive a personal Gift Coupon Book.
- Complete all sections of this form and include signature or processing will be delayed.

Current Account Information

GET Account Number _____

Account Owner
 Name _____ SSN or TIN _____

Student Beneficiary
 Name _____ SSN or TIN _____

Giftor Information

1.

2.

Name (*First, Middle, Last, Suffix*) _____

Social Security Number _____

Birth Date _____

Street Address/Apartment Number _____

Post Office Box Number _____

City / State / Zip Code _____

Email Address _____

Telephone Number (s) _____

Home

Work

Home

Work

Please check here if you wish to register the giftors as a couple and receive only one coupon book

Signature - REQUIRED

Only the Account Owner may authorize changes to the existing account.

I certify under penalty of perjury that I am the legal Account Owner and I authorize the Giftor(s) designated above to obtain information about their gift to this Guaranteed Education Tuition Program account and to receive a personal Gift Coupon Book.

Account Owner's Signature _____

Date _____

Submit to: Guaranteed Education Tuition, PO Box 43450, Olympia, WA 98504-3450 or by Fax at 360-704-6200

Questions: GETInfo@hecb.wa.gov or 1-800-955-2318